

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 1045 w/CS Baker Act

SPONSOR(S): Patterson

TIED BILLS: IDEN./SIM. BILLS: SB 340

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) Elder Affairs & Long Term Care (Sub)	8 Y, 0 N	Meyer	Liem
2) Future of Florida's Families	15 Y, 0 N w/CS	Meyer	Liem
3) Health Appropriations (Sub)	9 Y, 0 N w/ 1 Amd	Massengale	Massengale
4) Appropriations			
5)			

SUMMARY ANALYSIS

Some hospital emergency rooms are designated mental health receiving facilities. These receiving facilities examine patients to determine if they require involuntary commitment for mental health services because they are a danger to themselves or to other. This bill allows attending physicians working in one of these hospital emergency departments to release a patient seen under the authority of Part I of chapter 394, F.S. Before releasing the patient, the emergency room physician must complete the minimum mandatory involuntary examination before releasing a patient under the provisions of the Baker Act. Currently, only a psychiatrist or a clinical psychologist can make the decision to release a patient being evaluated under the Baker Act.

This bill has no fiscal impact.

This act takes effect upon becoming law.

This document does not reflect the intent or official position of the bill sponsor or House of Representatives.

STORAGE NAME: h1045d.ap.doc

DATE: April 11, 2003

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. DOES THE BILL:

- | | | | |
|--------------------------------------|------------------------------|-----------------------------|---|
| 1. Reduce government? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 2. Lower taxes? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 3. Expand individual freedom? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 4. Increase personal responsibility? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 5. Empower families? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |

For any principle that received a "no" above, please explain:

B. EFFECT OF PROPOSED CHANGES:

The Baker Act (Part I of chapter 394, F.S.), also known as the Florida Mental Health Act, provides that the Department of Children and Family Services designate facilities throughout the state of Florida to receive persons for psychiatric examination and treatment. These receiving facilities are a part of a continuum of care for persons with acute or severe and persistent mental illness. The statutes define a receiving facility as:

Any public or private facility designated by the department to receive and hold involuntary patients under emergency conditions or for psychiatric evaluation and to provide short-term treatment. The term does not include a county jail.

The receiving facility is required by statute to accept such persons, although once accepted, persons may be transferred to other receiving facilities under certain circumstances. The role of a receiving facility is to receive, examine, stabilize, and provide short-term treatment prior to discharging the patient to less restrictive care.

Currently, the statute requires that the receiving facility or its contractor not release a patient without the documented approval of a psychiatrist or a clinical psychologist. For receiving facilities that are also acute care hospital emergency departments, the bill would allow an attending emergency department physician to release the patient after determining that she or he does not meet the criteria for involuntary commitment to treatment.

C. SECTION DIRECTORY:

Section 1 amends section 394.463 (2)(f), F.S., to allow the attending emergency department physician in a receiving facility to release a patient who has been seen for evaluation of the need for involuntary commitment for mental health treatment.

Section 2 provides that bill take effect upon becoming law.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

No new revenues are associated with this bill.

2. Expenditures:

No new expenditures are required.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

No adverse economic impact is projected.

D. FISCAL COMMENTS:

If emergency departments can release patients without waiting for a psychiatrist or clinical psychologist to review a patient, hospitals may be able to reduce crowded waiting rooms.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Not applicable.

2. Other:

B. RULE-MAKING AUTHORITY:

No rule making authority is provided or revised.

C. DRAFTING ISSUES OR OTHER COMMENTS:

IV. AMENDMENTS/COMMITTEE SUBSTITUTE CHANGES

On April 11, 2003, the Subcommittee on Health Appropriations adopted an amendment that clarifies that the emergency room physician is in addition to the psychiatrist or clinical psychologist who can review the patient.